CONFIRMATION NO.

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02/15/2005

Law Offices of Patrick J.S. Inouye Suite 258

810 Third Avenue Scattic, WA 98104

02/22/2005 LWONDIM2 00000005 10646037

10/646.037

01 FC:1501 02 FC:1504 03 FC:80pi APPLICATION NO.

08/22/2003

FILING DATE

1400.00 OP 300.00 OP

> FIRST NAMED INVENTOR Gust H. Bardy

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(Décésitur's nume) Pigott Larissa (Signature 2005 February (Date)

ATTORNEY DOCKET NO.

020.0347.US.CON 9265 TITLE OF INVENTION: SYSTEM AND METHOD FOR PROVIDING FEEDBACK TO AN INDIVIDUAL PATIENT FOR AUTOMATED REMOTE PATIENT CARE

APPLN. TYPE	SMALL ENTITY	issue fee		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
penprovisional	МО	\$1400		\$300	\$1700	05/16/2005	
EXA	MINER	ART UNIT		CLASS-SUBCLASS			
JASTRZAB, JEFFREY R		3762		600-300000	•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/9B/122) attached. "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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a. Applicant claims S	s (from status indicated above SMALL ENTITY status. See is requested to apply the Iss Publication Fee (if required)	i) 37 CFR 1.27. 🔲 1	b. Applic	ant is no longer claiming SMAJ y) or to re-apply any previously other than the applicant, a regi	LL ENTITY status. Sec 37 C	FR 1.27(g)(2).	
mieresi as snown by the rec	torus of the Office States Pan	ent and I maemark Offi	ice.	***			
Authorized Signature _	THE ST			Date_Fel	bruary 17, 20	005	
Typed or printed name	Patrick J.S	Inouye		Registration	No. 40,297		
This collection of informati an application. Confidentia	on is required by 37 CFR 1.3 lity is governed by 35 U.S.C.	11. The information is a 122 and 37 CFR 1.14.	required i	to obtain or retain a benefit by t lection is estimated to take 12 r	he public which is to file (an nituaes to complete, includi	d by the USPTO to process	

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The Law Offices of Patrick J.S. Inouye

810 3rd Avenue, Suite 258 Seattle, Washington 98104 Telephone: (206) 381-3900 Facsimile: (206) 381-3999

Facsimile Transmittal

To:	USPTO, Mail Stop Issue For	Fax:	(703) 746-4000	
From:	Patrick J.S. Inouye	Date:	February 17, 2005	
Re:	U.S. Patent Application Serial No. 10/646,037	Pages:	4 (including cover sheet)	
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Effective on 12/8/2004.	C	omplete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.H. 4818).	.Application Number	10/646,037							
FEE TRANSMITTAL	Filing Date	August 22, 2003							
	First Named Inventor	Bardy							
For FY 2005	Daminer Name .	Jeffrey R. Jastrzab							
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit	3762							
TOTAL AMOUNT OF PAYMENT (\$) 1,706.00	Attorney Docket No. (020.0347.US.CON							
METHOD OF PAYMENT (check all that apply)									
Check X Credit Card Money Order None	Other (please identify):_								
Deposit Account Deposit Account Number: 503031 De	posit Account Name: Lew O	Offices of Patrick J.S. Incuye							
For the above-identified deposit account, the Director is hereby authorize	ed to: (check all that apply)								
Charge fee(s) indicated below	Charges fee(s) indica	sted below, except for the filing fee							
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autonomization on PTO-2038.									
FEE CALCULATION									
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Small Entity Small En		N FEES Entity							
Application Type Fee (5) Fee (5) Fee (5)		(S) Fees Paid (\$)							
Utility 300 150 500 250		100							
Design 200 100 100 50		65							
Plant 200 100 300 150		80							
Reissue 300 150 500 250		300							
Provisional 200 100 0 0		0							
2. EXCESS CLAIM FEES	U								
Fee Description		Small Entity							
Each claim over 20 or, for Reissues, each claim over 20 and more than	in the original restant	<u>Fee (\$)</u> 50 25							
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Total Claims Extra Claims Fee (\$) Fee Paid	(S) Mu	tible Dependent Claims							
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4. OTHER FEE(S) (round up to a whole number) x \$250.00 = \$ 0.00 Sees Paid(\$)									
Non-English Specification, \$130 fee (no small entity discount)									
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1000									
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Name (Print/Type) Patrick J.S. Incuye		Date February 17, 2005							

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